OFFICE OF THE MUNICIPAL CLERK

June 27, 2017

TO:

Collections - Leisha
Utility Billing Clerk – Diana
Municipal Billings – Lindsey
Property Tax/Sales Tax – Hannah

Fire Department
Police Department
Building Official

FROM: Sara Peterson, Municipal Clerk

SUBJECT: **Liquor License Transfer of Ownership Application (#4971) and Application for Restaurant Designation Permit**

This office has received notification of the following liquor license transfer:

Type:	Restaurant/Eating Place
Owner:	GraCED, Inc.
DBA:	The Larkspur Cafe
Location:	2 Lincoln Street Suite 1A
To:	**Beak LLC**
DBA:	Beak Restaurant
Location:	2 Lincoln Street Suite 1A

This office has also received a restaurant designation permit application for:

Licensee:	Beak LLC
DBA:	Beak Restaurant
Location:	2 Lincoln Street Suite 1A

The granting of this permit allows:

- Dining by persons 16-20 years of age
- Dining by persons under the age of 16 years, accompanied by a person over the age of 21
- Employment for persons 16 or 17 years of age

Please notify **no later than noon July 5** of any reason to protest these requests.

Thank you.

THE STATE of ALASKA
GOVERNOR BILL WALKER

Department of Commerce, Community, and Economic Development
ALCOHOL & MARIJUANA CONTROL OFFICE
550 West 7th Avenue, Suite 1600
Anchorage, AK 99501
Main: 907.269.0350

June 19, 2017

City and Borough of Sitka
Attn: Sara Peterson, Municipal Clerk
Via Email: sara.peterson@cityofsitka.org
melissa.henshaw@cityofsitka.org

License Type:	Restaurant/Eating Place	**License Number:**	4971
Licensee:	Beak LLC		
Doing Business As:	Beak Restaurant		

☐ **New Application**
☐ **Transfer of Location Application**
☒ **Transfer of Ownership Application**
☐ **Transfer of Controlling Interest Application**

We have received a completed application for the above listed license (see attached application documents) within your jurisdiction. This is the notice required under AS 04.11.480.

A local governing body may protest the approval of an application(s) pursuant to AS 04.11.480 by furnishing the director **and** the applicant with a clear and concise written statement of reasons for the protest within 60 days of receipt of this notice, and by allowing the applicant a reasonable opportunity to defend the application before a meeting of the local governing body, as required by 3 AAC 304.145(d). If a protest is filed, the board will deny the application unless the board finds that the protest is arbitrary, capricious, and unreasonable. To protest the application referenced above, please submit your protest within 60 days and show proof of service upon the applicant.

AS 04.11.491 – AS 04.11.509 provide that the board will deny a license application if the board finds that the license is prohibited under as a result of an election conducted under AS 04.11.507.

AS 04.11.420 provides that the board will not issue a license when a local governing body protests an application on the grounds that the applicant's proposed licensed premises are located in a place within the local government where a local zoning ordinance prohibits the alcohol establishment, unless the local government has approved a variance from the local ordinance.

Sincerely,

Jedediah Smith, Local Government Specialist
amco.localgovernmentonly@alaska.gov

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
alcohol.licensing@alaska.gov
https://www.commerce.alaska.gov/web/amco
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Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

What is this form?

A restaurant designation permit application is required for a licensee desiring designation under 3 AAC 304.715 – 3 AAC 304.795 as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049. Designation will be granted only to a holder of a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license, and only if the requirements of 3 AAC 304.305, 3 AAC 304.725, and 3 AAC 304.745, as applicable, are met. A detailed floor plan of the proposed designated and undesignated areas of the licensed business and a menu or expected menu listing the meals to be offered to patrons must accompany this form. Applicants should review AS 04.16.049 – AS 04.16.052 and 3 AAC 304.715 – 3 AAC 304.795. All fields of this form must be completed. The required $50 permit fee may be made by credit card, check, or money order.

Section 1 – Establishment Information

Enter information for licensed establishment.

Licensee:	Beak LLC				
License Type:	Restaurant/Eating Place	**License Number:**	4971		
Doing Business As:	Beak Restaurant				
Premises Address:	2 Lincoln St. Suite 1A				
City:	Sitka	**State:**	AK	**ZIP:**	99835
Contact Name:	Renée Trafton	**Contact Phone:**	(303) 478-2446		

Section 2 – Type of Designation Requested

This application is for the request of designation as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049, and for the request of the following designation(s) (check all that apply):

- ☐ **Dining after standard closing hours:** AS 04.16.010(c)
- ☑ **Dining by persons 16 – 20 years of age:** AS 04.16.049(a)(2)
- ☑ **Dining by persons under the age of 16 years, accompanied by a person over the age of 21:** AS 04.16.049(a)(3)
- ☑ **Employment for persons 16 or 17 years of age:** AS 04.16.049(c)
  NOTE: Under AS 04.16.049(d), this permit is not required to employ a person 18 - 20 years of age.

OFFICE USE ONLY					
Issue Date:		*Transaction #:*		*BRE:*	

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Form AB-03: Restaurant Designation Permit Application

Section 3 – Additional Information

Enter all hours that your establishment intends to be open. Include variances in weekend/weekday hours, and indicate am/pm:

11:00 AM - 9:00 PM Mon - Sat. Sunday 10:00 AM - 2:00 PM

Are any forms of entertainment offered or available within the licensed business or on the proposed designated portions of the premises? Yes ☑ No ☐

If "Yes", describe the entertainment offered or available:

Occasionally local musicians gather to play acustic, original music to accompany the diners.

Food and beverage service offered or anticipated is:

☑ table service ☐ buffet service ☐ counter service ☐ other

If "other", describe the manner of food and beverage service offered or anticipated:

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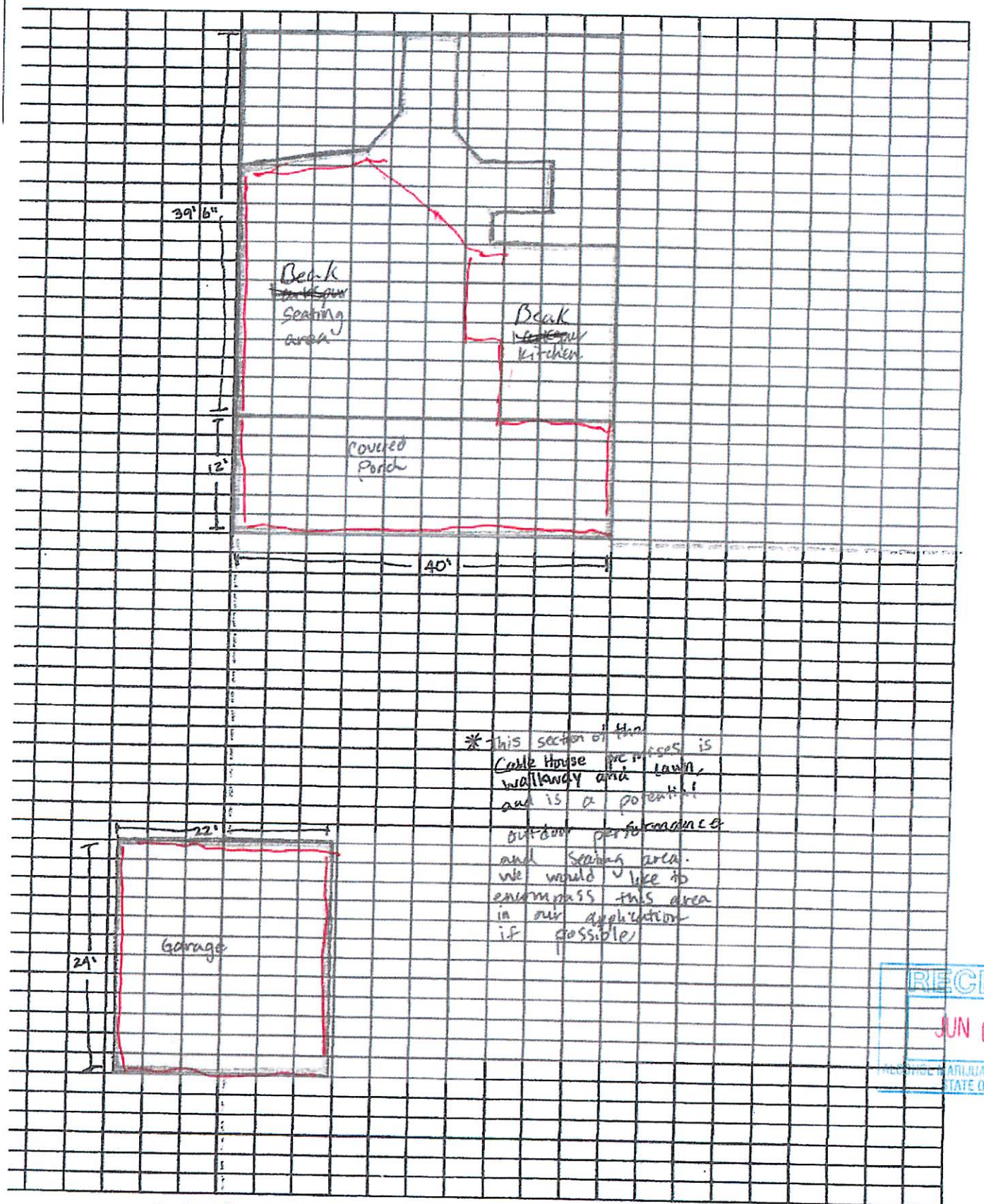
Is an owner, manager, or assistant manager 21 years of age or older always present on the premises during business hours? Yes ☑ No ☐

Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the third page of this form.

I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the third page of this form that meet the requirements of this form. Yes ☑ No ☐



*This section of the Cable House premises is walkway and lawn, and is a potential outdoor performance and seating area. We would like to encompass this area in our application if possible.

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*WE PROPOSE to USE A PORTION OF THE LOCKED GARAGE TO STORE BEER AND WINE.

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Form AB-03: Restaurant Designation Permit Application

Section 5 – Certifications and Approvals

Read each line below, and then sign your initials in the box to the right of each statement: Initials

I have included with this form a detailed floor plan of the proposed designated and undesignated areas of the licensed business for purposes of this application. I understand that this diagram is different than my licensed premises diagram. RJT

I have included with this form a menu, or an expected menu, listing the meals to be offered to patrons. RJT

I certify that the license for which I am requesting designation is either a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license. RJT

I declare under penalty of perjury that this form, including all attachments and accompanying schedules and statements, is true, correct, and complete.

Renee J. Trafton
Signature of licensee

Renee J. Trafton
Printed name of licensee

Sandy Baird
Signature of Notary Public

Notary Public in and for the State of Alaska.

My commission expires: 5/14/2020

SANDY BAIRD NOTARY PUBLIC STATE OF ALASKA My Commission Expires: 5/14/2020

Subscribed and sworn to before me this 31st day of May, 2017.

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Local Government Review (to be completed by an appropriate local government official): Approved ☐ Disapproved ☐

Signature of local government official

Date

Printed name of local government official

Title

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Form AB-03: Restaurant Designation Permit Application

AMCO Enforcement Review:

Signature of AMCO Enforcement Supervisor

Printed name of AMCO Enforcement Supervisor

Enforcement Recommendations:

AMCO Director Review: Approved ☐ Disapproved ☐

Signature of AMCO Director

Printed name of AMCO Director

Date

Limitations:

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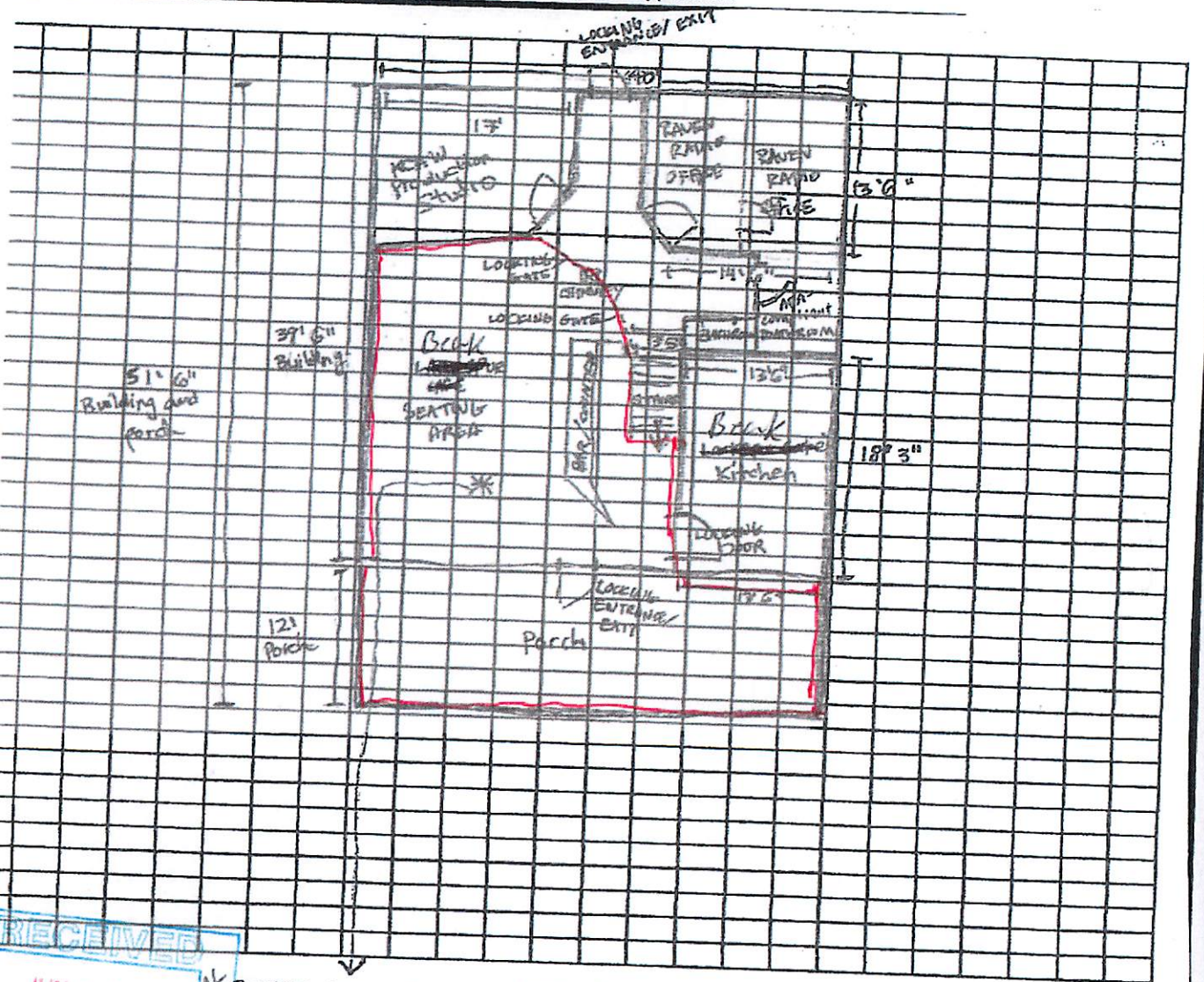
Form AB-03: Restaurant Designation Permit Application

Section 4 – Detailed Floor Plan

Provide a detailed floor plan that meets the requirements listed in Form AB-01 **and** clearly indicates the propo undesignated areas of the licensed business for purposes of this permit application.

4' 12'-scale



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*PLEASE SEE ATTACHED DETAILED ARCHITECTURAL DRAWING OF [redacted] Beck Restaurant SEATING AREA & BAR (1/4"=1.0' SCALE)

Brunch

Delta Junction Barley Porridge
Tender Barley, Cinnamon, Clove, Brown Sugar, Berries 13

One Scone and a Small Porridge
Assorted Selection 10

House Granola Parfait
Greek Style Yogurt, Peanut Butter-Chocolate Chip– Craisin Granola, Berries 15

Sitka Breakfast
Smoked Salmon Hash, Alaskan Bacon, Toast, Two Eggs Any Way 17

Breakfast Burrito
Potato, Scrambled Egg, Cheddar Cheese 13
Add Sausage 2

Salmon Scramble
Smoked Salmon, Cream Cheese, Spinach, Toast, Potato Hash 17

French Toast
Berry Compote, Whipped Cream 13

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Breakfast Breads
Individual House made Assorted 4

Sides
Two eggs any style 4
Toast 2
Salmon Hash 4
Potato Hash 3
Alaskan Sausage 3
Alaskan Bacon 4

GRATUITY FREE

Consuming raw or undercooked meats, poultry, seafood, shellfish, or eggs may increase your risk of foodborne illness.

Dinner

beak

Massaged Kale in Rosemary Vinaigrette
Apple Cider Vinegar, Candied Pecans, Macerated Berries 12

Alaskan Ranch
Romaine with House Croutons, Mat-Su Valley bacon, Sunflower Seeds 12

Warm Roasted Root Vegetable
Parsnips, Potato, Candied Carrot, Fennel, Herbed Balsamic Dressing 10

Creamy House Salmon Chowder
Local Coho, Potato, Carrot, Celery, White Pepper. Served With a Cheddar Scallion Scone 12

Alaskan Vegetable Barley Soup
Delta Junction Barley, Potato, Carrot, Parsnip, Tomato Base 8

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Smoked King Salmon Dip
Cream Cheese, Dill, Sourdough Crostini 10

Hummus
Pita, House cooked Garbanzo, Olive Oil, Paprika 8

Honey Miso Black Cod Tips
Sautéed Sesame Kale, Delta Junction Barley Pilaf, Sweet Soy Reduction 20

Seared Sockeye Salmon
Root Vegetable Medley, Carrot Puree, Fresh Herb Salad 22

'Everything' Encrusted Pacific Cod
Crushed Red Potato, Fennel Slaw, Stoneground Mustard 20

Salmon Burger
Pickled Red Onion, Mixed Greens, Dijon Aioli, Toasted Bun 23

Alaska Reindeer Sausage
Indian Valley Meats' sausage, Crushed Red Potato, Candied Carrots 22

GRATUITY FREE

Consuming raw or undercooked meats, poultry, seafood, shellfish, or eggs may increase your risk of foodborne illness.

Lunch

Massaged Kale in Rosemary Vinaigrette
Apple Cider Vinegar, Candied Pecans, Macerated Berries 12

Alaskan Ranch
Romaine with House Croutons, Mat-Su Valley Bacon, Sunflower Seeds 12

House Salmon Chowder
Local Coho, Potato, Carrot, Celery, White Pepper. Served With a Cheddar Scallion Scone 12

Alaskan Vegetable Barley Soup
Delta Junction Barley, Potato, Carrot, Parsnip, Tomato Base 8

Soup & Salad
Cup of Soup, Small Alaskan Ranch Salad 10

Hummus
Pita, Mixed Greens, Marinated Garbanzo, Tahini (Vegan) 8

Scones
Two Savory House Made Cheddar Scallion Scones 8

Hummus Wrap
Pita, Mixed Greens, Marinated Garbanzo, Tahini (Vegan), Chips 14
Sub Chips for Salad $2

Salmon Pita
Sesame Soy Marinated Sockeye Salmon, Fresh Greens, Spiced Aioli, Chips 18
Sub Chips for Salad $2

Rockfish Tacos
Three Corn Tortillas, Chipotle Rockfish, Cabbage, Cilantro, Spiced Sour Cream 18

Salmon Burger
Brioche Bun, Mixed Greens, Pickled Onion, Dijon Aioli, Chips 23
Sub Chips for Salad $2

Reindeer Sausage
Sauerkraut, Stone Ground Mustard, Chips or Salad 20

Salmon Mac'n Cheese
Coho Salmon, Tillamook Cheddar, Shell Pasta 17

GRATUITY FREE

Consuming raw or undercooked meats, poultry, seafood, shellfish, or eggs may increase your risk of foodborne illness.

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

What is this form?

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing liquor license. Applicants should review **Title 04 of Alaska Statutes** and **Chapter 304 of the Alaska Administrative Code.** All fields of this form must be completed, per AS 04.11.260, AS 04.11.280, AS 04.11.290, and 3 AAC 304.105.

This form must be completed and submitted to AMCO's main office, along with all other required forms and documents, before any license application will be considered complete.

Section 1 – Transferor Information

Enter information for the ***current*** licensee and licensed establishment.

Licensee:	GraCED, Inc		**License #:** 4971		
License Type:	Restaurant/Eating Place		**Statutory Reference:**		AS 04.11.100
Doing Business As:	The Larkspur Cafe				
Premises Address:	2 Lincoln St. Suite 1A				
City:	Sitka	**State:**	AK	**ZIP:**	99835
Local Governing Body:	City and Borough of Sitka				

Transfer Type:

- [x] Regular transfer
- [ ] Transfer with security interest
- [ ] Involuntary retransfer

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Complete Date:		***Transaction #:***	
Board Meeting Date:		***License Years:***	
Issue Date:		***BRE:***	

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 2 – Transferee Information

Enter information for the *new* applicant and/or location seeking to be licensed.

Licensee:	Beak LLC				
Doing Business As:	Beak Restaurant				
Premises Address:	2 Lincoln St. Suite 1A				
City:	Sitka	**State:**	AK	**ZIP:**	99835
Community Council:					

Mailing Address:	692 Indian River Rd.				
City:	Sitka	**State:**	AK	**ZIP:**	99835

Designated Licensee:			
Contact Phone:	(303) 478-2940	**Business Phone:**	(907) 966-2326
Contact Email:	Renee@beakrestaurant.com		

Seasonal License? Yes ☐ No ☑ If "Yes", write your six-month operating period: _____

Section 3 – Premises Information

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Premises to be licensed is:

☑ an existing facility ☐ a new building ☐ a proposed building

The next two questions must be completed by beverage dispensary (including tourism) and package store applicants only:

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the outer boundaries of the nearest school grounds? Include the unit of measurement in your answer.

0.5 mile or 2640 ft.

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer.

0.3 mile

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Form AB-01: Transfer License Application

Section 4 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 5.
If more space is needed, please attach a separate sheet with the required information.
The following information must be completed for each licensee and each affiliate (spouse).

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		**State:**		**ZIP:**	

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This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		**State:**		**ZIP:**	

Section 5 – Entity Ownership Information

This section must be completed by any entity, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 6.
If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a **corporation**, the following information must be completed for each ***stockholder who owns 10% or more*** of the stock in the corporation, and for each ***president, vice-president, secretary,*** and ***managing officer***.
- If the applicant is a **limited liability organization**, the following information must be completed for each ***member with an ownership interest of 10% or more***, and for each ***manager***.
- If the applicant is a **partnership**, including a **limited partnership**, the following information must be completed for each ***partner with an interest of 10% or more***, and for each ***general partner***.

Entity Official:	Renee Jakaitis Trafton				
Title(s):	Owner	**Phone:**	(303) 478-2940	**% Owned:**	100
Address:	692 Indian River Rd.				
City:	Sitka	**State:**	AK	**ZIP:**	99835

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Form AB-01: Transfer License Application

Entity Official:					
Title(s):		**Phone:**		**% Owned:**	
Address:					
City:		**State:**		**ZIP:**	

Entity Official:					
Title(s):		**Phone:**		**% Owned:**	
Address:					
City:		**State:**		**ZIP:**	

Entity Official:					
Title(s):		**Phone:**		**% Owned:**	
Address:					
City:		**State:**		**ZIP:**	

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	10056808	**AK Formed Date:**	4/20/2017	**Home State:**	AK
Registered Agent:	Renée Jakaitis Trafton		**Agent's Phone:**	(303) 478 - 2940	
Agent's Mailing Address:	692 Indian River Rd.				
City:	Sitka	**State:** AK		**ZIP:** 99835	

Residency of Agent: Sitka, Alaska (Yes) No

Is your corporation or LLC's registered agent an individual resident of the state of Alaska? ☑ ☐

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Form AB-01: Transfer License Application

Section 6 – Other Licenses

Ownership and financial interest in other alcoholic beverage businesses: Yes (No)

Does any representative or owner named as a transferee in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska? ☐ ☑

If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s):

Section 7 – Authorization

Communication with AMCO staff: Yes No

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? ☑ ☐

If "Yes", disclose the name of the individual and the reason for this authorization:

Matt Trafton – Husband

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Form AB-01: Transfer License Application

Section 8 – Transferor Certifications

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

I declare under penalty of perjury that the undersigned represents a **controlling interest** of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

Grace E Roller

Signature of transferor

Grace E. Roller

Printed name of transferor

Subscribed and sworn to before me this 25th day of May, 2017.

STATE OF ALASKA
NOTARY PUBLIC
DAVID W. NELSON II
My Commission Expires 5-15-21

Signature of Notary Public

Notary Public in and for the State of Alaska.

My commission expires: 15 May 2021

Signature of transferor

Printed name of transferor

Subscribed and sworn to before me this _____ day of _____, 20____.

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STATE OF ALASKA

Signature of Notary Public

Notary Public in and for the State of _____.

My commission expires: _____

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 9 – Transferee Certifications

Read each line below, and then sign your initials in the box to the right of each statement:	Initials
I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.	RT
I certify that all proposed licensees have been listed with the Division of Corporations.	RT
I certify that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.	RT
I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.	RT
I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.	RT

As an applicant for a liquor license, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete.

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STATE OF ALASKA

Renee J. Trafton
Signature of transferee

Renée J. Trafton
Printed name

Subscribed and sworn to before me this 31st day of May, 2017.

SANDY BAIRD
NOTARY PUBLIC
STATE OF ALASKA
My Commission Expires: 5/4/2020

Sandy Baird
Signature of Notary Public

Notary Public in and for the State of Alaska.

My commission expires: 5/4/2020

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Form AB-02: Premises Diagram

What is this form?

A detailed diagram of the proposed licensed premises is required for all liquor license applications, per AS 04.11.260 and 3 AAC 304.185. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing. If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.

The second page of this form is not required. Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the second page of this form. The first page must still be completed, attached to, and submitted with any supplemental diagrams. An AMCO employee may require you to complete the second page of this form if additional documentation for your premises diagram is needed.

This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

	Yes	No
I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.	☑	☐

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Beak LLC	**License Number:**	4971		
License Type:	Restaurant / Eating Place				
Doing Business As:	Beak Restaurant				
Premises Address:	2 Lincoln St. Suite 1A				
City:	Sitka	**State:**	AK	**ZIP:**	99835

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Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
alcohol.licensing@alaska.gov
https://www.commerce.alaska.gov/web/amco
Phone: 907.269.0350

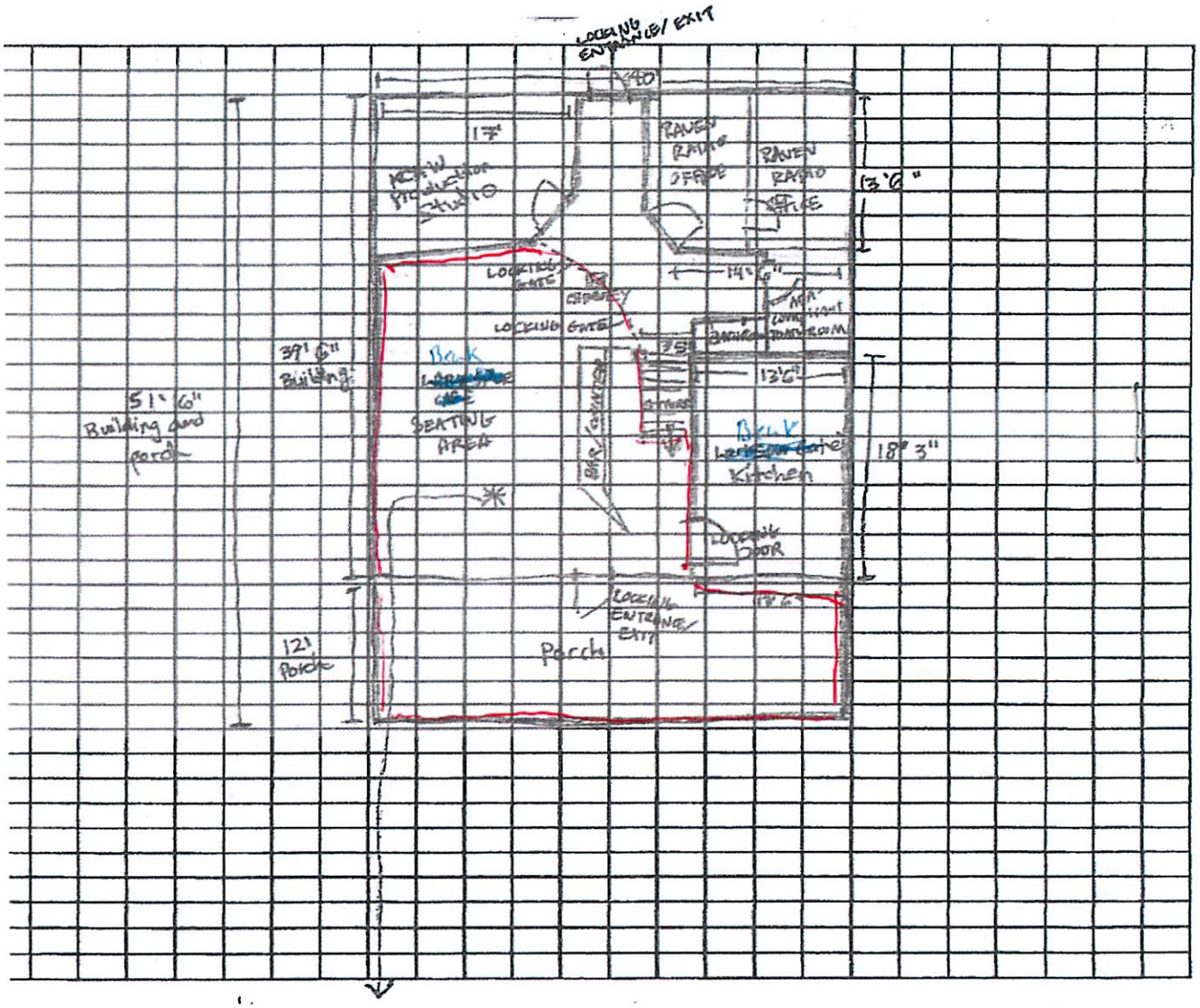
Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram

Section 2 – Detailed Premises Diagram

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. Clearly indicate the interior layout of any enclosed areas on the proposed premises. Clearly identify all entrances and exits, walls, bars, a red the perimeter of the areas designated for alcohol storage, service, consumption, and manufacturing. Incl streets, and points of reference in your drawing. You may attach blueprints or other detailed drawings that n this form.

4' 12' Scale



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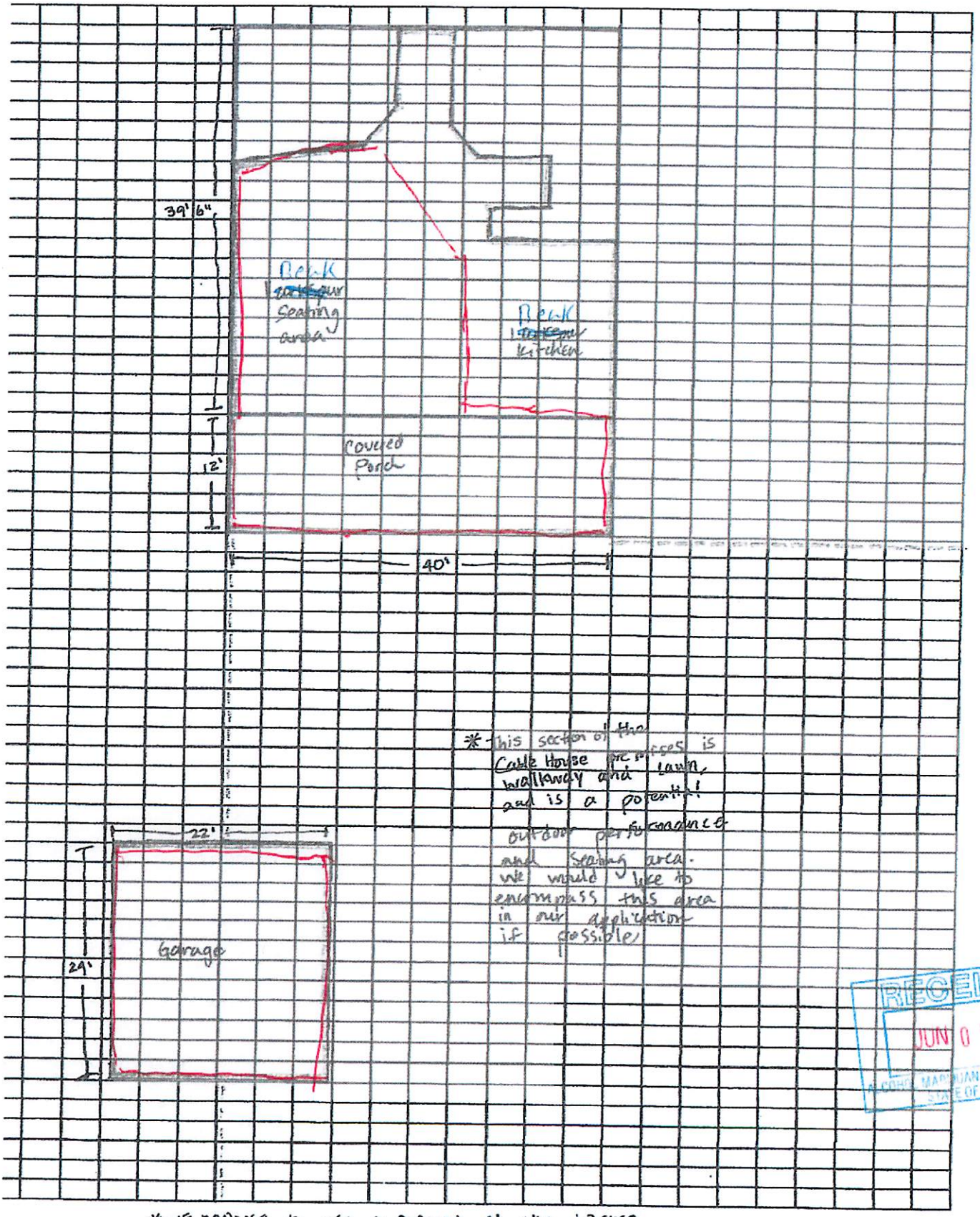
STATE OF ALASKA



*This section of the Cable House premises is walkway and lawn, and is a potential outdoor performance and seating area. We would like to encompass this area in our application if possible!

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*WE PROPOSE TO USE A PORTION OF THE LOCKED GARAGE TO STORE BEER AND WINE.